



Memorandum

for your information ver

OD/NCI

DATE: February 8, 1965

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Surgeon General, PHS

HROUGH: Director, NIH/S/

ROM : Director, NCI

UBJECT: Discussion by the National Advisory Cancer Council regarding H. R. 3140.

At its meeting on February 3 and 4, the National Advisory Cancer Council spent considerable time discussing the President's Commission Report on Heart Disease, Cancer and Stroke and Mr. Harris's bill, H. R. 3140. In the discussion of the Commission Report the Council was generally supportive of the recommendations of the report, but several members expressed some reservations and wished to defer judgment until they could study Volume 2 which is not yet available and presents the evidence upon which the recommendations were based.

The Council's reaction to H. R. 3140 was much less favorable. There seemed to be fairly unanimous support to the basic desirability of the centers and stations, but there were several details of the legislation which were of obvious concern to the Council.

- 1. The Council questioned whether it would be necessary to create another Council and expressed the hope that the new program could be handled through existing councils and institutes.
- 2. The Council was concerned over the inclusion of the phrase "other major diseases" lest the program become diffuse and lose its effectiveness in tackling heart disease, cancer and stroke.
- 3. The Council feared that requirement of 10 percent matching for construction might exclude some of the institutions best suited for participation.
- 4. The limitation of enabling legislation to a five-year period is thought to offer inadequate continuity of operating expenses to permit institutes to develop a sound program and recruit career personnel for its execution.
- 5. The Council expressed regret that it had not had any opportunity to participate in discussions before the draft legislation was submitted and especially that it was not given sufficient time to study it prior to the Hearings.

6. It was noted that some of the major institutions providing the best in research, treatment, and patient care in the cancer field are not formally associated with medical schools; hope was expressed that resulting legislation and program would permit funding to such institutions.

The Council expressed the view that NIH would be the most logical focal point for administration of the program if the legislation is enacted.

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